

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2008</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 514572002400
Application Number	10/500,180	Filed (Int'l) November 29, 2002
For	CAPILLARY ELECTROPHORESIS CHIP APPARATUS FOR DETECTING NUCLEOTIDE POLYMORPHISM AND SINGLE NUCLEOTIDE POLYMORPHISM	
Art Unit	4132	Examiner H. Kafimosavi

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 60.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$

Applicant claims small entity status. See 37 CFR 1.27.

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account.

The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952  
~~I have enclosed a duplicate copy of this sheet. Fee Transmittal Form (PTO/SB/17) is attached to this submission in duplicate.~~

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the  applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71.  
~~Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).~~

attorney or agent of record. Registration Number 60,440

attorney or agent under 37 CFR 1.34.  
~~Registration number if acting under 37 CFR 1.34~~ \_\_\_\_\_

/Yan Leychkis/ \_\_\_\_\_ May 20, 2008  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

Yan Leychkis \_\_\_\_\_ (858) 314-7702  
 Typed or printed name \_\_\_\_\_ Telephone Number \_\_\_\_\_

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.